

**CONFIDENTIAL**

18 July 1958

BUDGET - 65  
FINANCE - 81  
FISCAL - 74  
FAS - 68  
MRD - 41  
TAS - 84

COMPTROLLER INSTRUCTION NO. 62

SUBJECT: General - Contacts With Other Government Agencies  
Specific - Approval Required Prior to Liaison Contacts With Officials of Other Government Agencies

1. PURPOSE

The purpose of this Instruction is to set forth the procedure to be followed for obtaining approval to make liaison contacts with officials of other Government agencies.

2. PROCEDURE

The procedure for requesting liaison contact clearances is as follows:

a. Routine Requests

- (1) At least one month prior to the date that liaison contact is to be made the requestor should prepare a Form No. 123, Request For Approval of Liaison, in quintuplicate (copy attached).

NOTE: When preparing Form No. 123 care should be taken to insure that all information regarding the non-CIA employee is accurate, e.g., the spelling of the name, phone number, etc.

- (2) Insert, "Administrative Officer, Office of Comptroller" in the space "Through: 1" on Form No. 123 and submit the completed form in quintuplicate to the Office of Comptroller for authorization.

DOCUMENT NO. \_\_\_\_\_  
DO CHANGE IN CLASS. ☐  
☐ DECLASSIFIED  
CLASS. CHANGED TO: TS S (C) 201  
NEXT REVIEW DATE: \_\_\_\_\_  
AUTH: HR 70-2  
DATE: 29-3-92 REVIEWER: 806144  
Emergency Requests

Emergency liaison contact clearances may be requested from the Employee Activity Branch PSD/OS by the Division

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or Staff Chief by telephone. Such clearances will be obtained in two to three days on an ad hoc basis; however, if contact clearances so granted are to be on a continuing basis a formal request shall be submitted as outlined in paragraph 2a, above.

3. PERIOD OF VALIDATION OF APPROVALS

- a. Security Office approval of contact liaison requests received on Form No. 123 are valid for one year from date of such approval. Approvals made on an ad hoc basis are valid for three or four meetings when such meetings pertain to one subject.
- b. Each Division or Staff should periodically review its contact liaison approvals for renewal as required.

25X1A

E. R. SAUNDERS  
Comptroller

Attachment:

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~~S-E-C-R-E-T~~

REQUEST FOR APPROVAL OF LIAISON				DATE	
TO : Chief, Employee Activity Branch, PSD/OS					
THROUGH: 1. _____ 2. Chief, Official Cover & Liaison/CCB/FI					
<input type="checkbox"/> reported <input type="checkbox"/> one-time The following contact is hereby <input type="checkbox"/> requested to be effective on a <input type="checkbox"/> continuing basis:					
CIA EMPLOYEES			NON-CIA EMPLOYEE		
NAME	EXT.	OFFICE	NAME (Last) (First) (Initial)	RANK	
NAME	EXT.	OFFICE	TITLE		
NAME	EXT.	OFFICE	ORGANIZATION		
NAME	EXT.	OFFICE	BUSINESS ADDRESS		
NAME	EXT.	OFFICE			
NAME	EXT.	OFFICE			PHONE
BRIEF DESCRIPTION OF LIAISON, COMMENTS, AND KNOWN BIOGRAPHICAL INFORMATION					
CLASSIFICATION OF MATTER TO BE DISCUSSED					
<input type="checkbox"/> TOP SECRET <input type="checkbox"/> SECRET <input type="checkbox"/> CONFIDENTIAL <input type="checkbox"/> UNCLASSIFIED					
OFFICE/DIVISION/STAFF			AUTHORIZED SIGNATURE		
SECURITY APPROVAL					
<div style="text-align: center; font-weight: bold; font-size: 1.2em;">             CONFIDENTIAL           </div>					